

License _____
Street, City, State ZIP
Phone
Email

Your business name

RECEIPT

RECEIVED FROM **Client name**
Job address
Email
Phone

DATE PAID:

DESCRIPTION	QTY	UNIT PRICE	AMOUNT
Existing siding tear-off and debris removal (per sq ft)			
OSB wall sheathing repair and replacement (per sq ft)			
House wrap weather barrier installation (per sq ft)			
Window and door opening flashing tape (per linear ft)			
Vinyl siding starter strip installation (per linear ft)			
Vinyl outside corner post installation (per linear ft)			
Vinyl J-channel installation at openings (per linear ft)			
Vinyl siding panel installation (per sq ft)			
Fiber cement lap siding installation (per sq ft)			
Vinyl soffit panel installation (per sq ft)			
Aluminum fascia cover installation (per linear ft)			

Subtotal

TOTAL PAID

PAYMENT DETAILS

Paid by: cash · check · card · bank transfer
Check # or reference: _____
Payment for: deposit · progress payment · final payment
Balance still owed: _____

TERMS AND CONDITIONS

This receipt records the payment shown for the invoice or quote named above. Workmanship is warranted for _____ years; siding and trim carry the manufacturer’s warranty. Any balance still owed is written under Payment details.